

## Statement of Understanding

I UNDERSTAND THAT the Norfolk Naval Shipyard plans to curtail operations, except for essential services during the Christmas/New Year Holiday Season, that work will not be available if I do not have annual leave for the period of curtailment, and that I may be required to be in non-pay status.

I UNDERSTAND THAT the Norfolk Naval Shipyard is an industrial activity engaged in the overhaul and repair of U.S. Navy ships. As at any other large industrial complex, I may be assigned to work in areas where certain chemical agents are present. These agents may include, but are not limited to: fumes, dust, noise, heat, ionizing and non-ionizing radiation, chemicals, etc. To ensure employee safety and health, the Shipyard maintains personnel protection programs consistent with applicable laws and regulations. These programs may include engineering controls, training, work procedures, use of personal protective equipment, and medical surveillance. With respect to medical surveillance programs, I may be required to take medical examinations to assess my medical qualifications for duty involving work with these agents.

I UNDERSTAND THAT in the performance of my duties, I may be required to use a respirator. I understand that a beard interferes with the use of such equipment by preventing a proper and adequate seal. Therefore, as a condition of my employment, I will not maintain a beard when the use of a respirator is required. Failure to observe this condition of employment will place me in non-duty, non-pay status in accordance with the Shipyard's disciplinary action policy.

I UNDERSTAND THAT my appointment is subject to satisfactory completion of my physical examination and lab results and that if I fail to meet these qualifications, termination of my appointment will result.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
(typed)

SIGNATURE: \_\_\_\_\_